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Eckert Seamans Cherin & Mellott, LLC
 U.S. Steel Tower
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JAN 31 2006
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 FAX 412 566 6099
www.eckertseamans.com

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TO: United States Patent and Trademark Office

COMPANY: _____ FAX NUMBER: 571-273-8300

DATE: January 31, 2006 TIME: 4:08 PM

FROM: Michele R. Susko DIRECT DIAL: 412-566-2066

TOTAL PAGES (including cover): 4

MESSAGE:

Attachments - Revocation of Power of Attorney/New Power of Attorney

Docket No. 291010-00475

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PTO/SB/21 (09-04)

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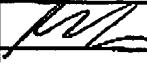
Total Number of Pages In This Submission

Application Number	10/755,812
Filing Date	January 31, 2006
First Named Inventor	Hao Xue et al.
Art Unit	2643
Examiner Name	Melur Ramakrishnaiah
Attorney Docket Number	555255012684

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Remarks
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<input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Eckert Seamans Cherin & Mellott, LLC		
Signature			
Printed name	Robert A. Diaz		
Date	January 31, 2006	Reg. No.	55,109

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Michele R. Susko	Date	January 31, 2006

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JAN 31 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:) Examiner: Ramakrishnaiah,
Hao Xue et al.) Melur
Application No. 10/755,812)
Group Art Unit: 2643)
Confirmation No.: 3131)
Filed: January 12, 2004)
For: Method and System for Supporting)
Network 3G Data Capability Information)
in a CDMA Network)

Revocation of Power of Attorney with New Power of Attorney

January 31, 2006

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Attached to this paper is a "Revocation of Power of Attorney with New Power of Attorney" form (PTO/SB/82) signed by Larry Conlee, the Chief Operating Officer of the Assignee of Record, on January 25, 2006.

If there are any issues with the submitted form, please contact me at the telephone number listed below.

Sincerely,



Robert A. Diaz
Attorney for the Applicants
Telephone: 412-566-1920
Fax: 412-566-6099

JAN 31 2006

PTO/SB/82 (09-04)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/755,812
Filing Date	January 12, 2004
First Named Inventor	Hao Xue et al.
Art Unit	2643
Examiner Name	M. Ramakrishnaiah
Attorney Docket Number	291010-00475

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

03705

Please change the correspondence address for the above-identified application to:

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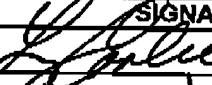
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	
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Name	Larry Canlee
------	--------------

Date	25 Jan 2006
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Telephone	
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519-888-7465

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

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